

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002354

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** LIFE CHANGING MINISTRIES / UNITED CHURCH IN CHRIST INC.

**Current Principal Place of Business:**

2050 EMERSON STREET  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 1403  
GREEN COVE SPRINGS, FL 32043 US

**New Mailing Address:**

**FEI Number:** 59-3314863

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ANDREWS, WILBERT A BISHOP  
4038 PIER STATION ROAD WEST  
GREEN COVE SPRINGS, FL 32043 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: ANDREWS, WILBERT A BISHOP  
Address: 4038 PIER STATION ROAD WEST  
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: D ( ) Delete  
Name: ANDREWS, FAUSTINA M  
Address: 4038 PIER STATION ROAD WEST  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D ( ) Delete  
Name: HUDDLESTON, FRANKLIN I BISHOP  
Address: 3657 SUGAR CREEK DR.  
City-St-Zip: TAMPA, FL 33619

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BISHOP W.A. ANDREWS

CD

03/23/2009

Electronic Signature of Signing Officer or Director

Date